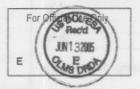
U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



1. File Number U - 2203

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

15. Signature and verification. The undersigned declares, under penalty of	of Perjury and other applicable penalties of the law, that all of the information nying documents), has been examined by the signatory and is, to the best of the section on penalties in the instructions.) On 6-7-05 630 821 7932 Date Telephone Number
15. Signature and verification. The undersigned declares, under penalty of submitted in this report (including the information contained in any accompand undersigned's knowledge and belief, true, correct, and complete. (See the second secon	nying documents), has been examined by the signatory and is, to the best of the section on penalties in the instructions.)
15. Signature and verification. The undersigned declares, under penalty of submitted in this report (including the information contained in any accompanion).	nying documents), has been examined by the signatory and is, to the best of the
15. Signature and verification. The undersigned declares, under penalty of	
NIS CONTRACTOR OF THE PROPERTY	June 1
	gnature
State ZIP Code + 4	The state of the s
City	F 199-
Street	E SHOWE
PORT III STANKING THE	7.b. Amount.
P.O. Box, Bldg., Room No., if any	
Trade Name, if any:	
Name	
Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
 Held an interest in, engaged in transactions (including loans) with, o conetary value from an employer whose employees your organiza 	
(except as specified in the exc	couse or minor child directly or indirectly had any of the following interests clusions set forth in the instructions):
ORGANIZER	
Position in labor organization.	State ILLINOIS ZIP Code +4 Codoll
WARREN VILLE	City CHICAGO
Street 28600 BELLA VISTA PARKWAY	Street 12 E ERIE ST
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any
	Labor Organization File Number 001 - 949
Contract in a second and second secon	Name CHICAGO REGIONAL COUNCIL OF CARPENTER
ame JOHN R MALONE	
Name and address of person filling.	Name, file number, and address of labor organization.

DISCLAIMER

The transactions, dealings and interests that are detailed in the attached LM-30 Report represent my good faith effort to reconstruct the reportable occurrences for the period of January 1, 2004 to December 31, 2004. Accurate records of reportable occurrences were not kept for the 2004 fiscal year, and some or many items may have been unintentionally omitted. If, in the future, it comes to my attention that there exists a transaction, dealing or interest that should have been reported for the period of January 1, 2004 to December 31, 2004, I will immediately file an amended LM-30 Report.

Signature

Fre Malue 6-705